Job Aids for Immunization

Background

A multitude of factors can compromise coverage and quality of immunization services in developing countries. Service provision is weakened by poor training, absent or unclear technical guidelines, and providers’ negative attitudes towards clients. Service utilization, on the other hand, can be hindered by poor community knowledge or awareness regarding the importance of vaccination and the need and timing of return visits, as well as by unpleasant experiences using services that are unfriendly, unreliable, or inconvenient. Health workers, supervisors and managers of immunization services at peripheral levels need support in making technical decisions on planning immunization services, enhancing demand, correctly storing and administering vaccines, and safely disposing immunization waste. Materials on such topics, developed by multilateral and bilateral development agencies or NGOs, are often not sufficiently available in the most appropriate technical or user-friendly format for frontline health workers. A common, but often inadequate, solution to this has been resource-intensive, pre-service or in-service classroom training.

Carefully-designed job-aids can effectively complement training to strengthen program management, improve health worker performance, and enhance community demand. Job-aids offer significant advantages over stand-alone classroom training, as they are used in the workplace. Skills improved during training may erode over time; whereas (well-designed and -used) job-aids continuously reinforce and consolidate skills. Training is resource intensive, both in terms of money and staff time; whereas job-aids are a relatively low-cost and accessible way to assist and remind health workers and managers to carry out their tasks in accordance with well-defined guidelines. These aids can come in a variety of formats ranging from posters, stickers, leaflets and tear-out sheets, to CDs and computer programs.

Developed initially for industrial applications to elucidate design principles, job-aids have been used most extensively in international public health in family planning, to assist health workers in guiding clients to select appropriate contraceptive methods. More recently, the IMNCI program has relied on job-aids to help health workers diagnose and treat sick children. In utilized in supplemental immunization activities, particularly in the polio eradication campaign, in the form of Q&A booklets for vaccinators and vaccine vial monitors (VVMs). The broader potential usefulness of job-aids in the immunization program has been less well-recognized. In India, as in other developing countries, immunization-related job-aids have been largely confined to the following three areas:

1. Counselling caregivers, e.g. leaflets on the immunization schedule and common Vaccine Preventable Diseases and vaccines
2. Cold chain, e.g. vaccine carrier stickers on the various stages of the VVM
3. Injection safety, e.g. posters on the safe handling of immunization waste

However, job-aids could make a substantially greater contribution to increasing vaccination coverage and improving the quality of immunization services.

The introduction of new vaccines into the immunization schedule has renewed interest in the use of job-aids for immunization. Updated materials assist health workers in counselling caregivers on the new schedule and provide the possibility to reinforce the need for timely adherence to the immunization schedule. Because new vaccines are so expensive and vulnerable to freeze-damage in the cold chain, there is an added need to train cold-chain handlers and health workers in the safe storage and handling of vaccines. Furthermore, innovative micro-planning and tracking solutions are required to minimize left-outs and reduce drop-outs. New vaccines offer an opportunity to engage with caregivers and the community on the importance of the new as well as traditional vaccines.

Development Process

USAID’s IMUNIZATIONbasics project in India has developed a package of job-aids that cover the various aspects of immunization. The first step in developing these aids was to assess, with the Ministry of Health and Family Welfare and other partners, the kinds of technical information required at different levels. The multi-agency review of India’s Universal Immunization Program (UIP) in 2004 identified the need for clear technical information for the various levels of the program. Needs had been identified for all areas, including guidelines for micro-planning, vaccination schedules, cold chain maintenance, waste disposal, supervision and communication with the community.
and related guidelines were identified. This process paralleled the development of training material for health workers (2006) and medical officers (2008), which helped to achieve consensus in updating many immunization-related technical guidelines.

The next step was to conduct a review of the existing immunization-related material in the country and overseas. The difficulty encountered at this stage was that although a variety of materials were found, most had only limited availability. A notable exception was UNICEF India’s comprehensive web-based repository of child-centred materials. These, however, did not include several useful job-aids developed by UNICEF field offices in the past and present. Ministry of Health and Family Welfare web-sites such as the Policy Reform Options Database (PROD) provided some information on state-led innovations in producing job-aids.

To avoid duplication, materials from several generic job-aids designed by WHO, UNICEF, PATH and others were adapted to the current Indian context. An interactive process was followed to allow end-users, national stakeholders and international experts to review and provide inputs throughout the final design of the job-aids.

Attempts were made to minimize common barriers to the use of job-aids due to unattractive or inappropriate design, wordy content, and health worker reluctance to use them. These included:

- Use of basic design principles
- Digital photography, image scanning, and colourful computer graphics to produce a compelling and attractive design
- Simple pictorials to indicate clear actions
- Easy to understand supervision formats accompanied by support material and explanatory notes
- Minimum of text to facilitate use and understanding of the key messages
- Unified theme or presentation for each technical area such as cold chain or injection safety
- One detailed job-aid devoted to each topic (e.g. individual posters for each piece of cold chain equipment)
- Translation to Hindi
- Ability to be used in work settings to facilitate their maximum use.

The information was either a sequential checklist (e.g. on correctly reading a thermometer) or a decision-making algorithm (e.g. on safely disposing immunization waste). The three types of job-aids are:

1. Reminder job-aid: e.g. high-visibility sticker pasted on ice-lined refrigerators to assist cold chain handlers in correctly storing vaccines
2. Assistant job-aid: e.g. supportive supervision checklist for use during supervision visits to health facilities and session sites
3. Hidden job-aid: e.g. session site poster discreetly reminding health workers of the four key messages for caregivers.

The format, sites for use, target audience and expected outcomes of these job-aids are described in detail in the table at the end of this article.

**Dissemination**

Recognizing the importance of the scale-up of the job-aids, dissemination had been an integral part of the overall material development strategy. Buy-in of central and state ministries of health and development partners was achieved after extensive advocacy on the possible uses and thorough research on production and budgeting. As a result, state governments in Uttar Pradesh and Jharkhand have allocated funds for the preparation of plans based on the micro-planning software and for the dissemination of the printed materials at sub-centre, PHC and district levels. UNICEF’s field office in Chhattisgarh state has also produced the cold-chain-related job-aids. Several of the materials were also included in the Government of India’s plan for the immunization training of 50,000 medical officers across the country. The utilization of the materials has transcended local and programmatic boundaries. Reflecting the growing interest in the job-aids, the Government of Madhya Pradesh has adapted the supportive supervision checklists for use in other child health settings. Several states in Nigeria too have adapted the use of these checklists to the local context.

It is expected that the use of these job-aids can be instrumental in improving health workers’ and immunization program managers’ performance. However, their effectiveness depends upon several factors. Firstly, training is needed on using the more complex tools for micro-planning. Secondly, their use requires the support of senior health officials in ensuring their wider dissemination. Such support, for example, would guarantee their utilization in immunization campaigns, their distribution in training of health workers and medical officers, or their local distribution in the community. Thirdly, the effectiveness of these aids in the performance of health workers and managers of immunization services needs to be measured. Finally, an online database or clearinghouse of any job-aids produced would ensure their sustained use.

The pictorial job-aids (posters or stickers) are shown at the end of the article. To order a CD containing all the job-aids, please contact Abhishek Tandon (abhishek@immbasics.org)
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<tbody>
<tr>
<td><strong>State and District Programme Implementation Plan (PIP) Template</strong></td>
<td>* Excel Worksheet</td>
<td>* State and district immunization managers</td>
<td>* State and national immunization managers</td>
<td>* Uniform, comprehensive and simplified district planning process * Easy compilation of district PIPs</td>
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<tr>
<td><strong>Micro-planning Template (Routine Immunization)</strong></td>
<td>* Excel Worksheet</td>
<td>* District and block immunization managers</td>
<td>* Block immunization managers</td>
<td>* Realistic and rational determination of beneficiaries, vaccines and logistics requirement * Supervision plan * Prioritization of areas</td>
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<tr>
<td><strong>Micro-planning Template (Japanese Encephalitis Campaign)</strong></td>
<td>* Excel Worksheet</td>
<td>* District and block immunization managers</td>
<td>* Block immunization managers</td>
<td>* Realistic and rational determination of beneficiaries, vaccines and logistics requirement * Supervision plan * Prioritization of areas</td>
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<td><strong>Everyone’s Oath: Immunization</strong></td>
<td>* Film (VCD)</td>
<td>* Training programs</td>
<td>* Health Workers Supervisors Medical Officers Other Government Officers</td>
<td>* Effective management of immunization program in the field * Planning, conducting, monitoring and reporting a quality immunization session</td>
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<td><strong>Supportive Supervision</strong></td>
<td>* Checklists * Excel Worksheet</td>
<td>* PHCs and Immunization Sessions</td>
<td>* Block and District Immunization Managers NGO Partners</td>
<td>* Rapid assessment on immunization quality at session and PHC levels * Feedback to decision makers</td>
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<td>* Poster * Sticker</td>
<td>* Cold chain storage points * Health facilities</td>
<td>* Cold chain handlers Supervisors</td>
<td>* Correct placement of cold chain equipment</td>
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<tr>
<td><strong>Store It Right (Ice-Lined Refrigerator)</strong></td>
<td>* Poster * Sticker</td>
<td>* Cold chain storage points * Health facilities</td>
<td>* Cold chain handlers Supervisors</td>
<td>* Correct storage of vaccines inside Ice-lined refrigerator</td>
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<td><strong>Freeze It Right (Deep Freezer)</strong></td>
<td>* Poster * Sticker</td>
<td>* Cold chain storage points * Health facilities</td>
<td>* Cold chain handlers Supervisors</td>
<td>* Correct storage and freezing of ice-packs inside deep freezer</td>
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<tr>
<td><strong>Store It Right (Domestic Refrigerator)</strong></td>
<td>* Poster * Sticker</td>
<td>* Cold chain storage points * Health facilities * Private clinics</td>
<td>* Cold chain handlers Private practitioners</td>
<td>* Correct storage of vaccines inside domestic refrigerator</td>
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<tr>
<td><strong>Store It Right (Vaccine Carrier)</strong></td>
<td>* Poster * Sticker</td>
<td>* Cold chain storage points * Health facilities * Sub-centres Private clinics Outreach sites Anganwadi centres</td>
<td>* Cold chain handlers Supervisors Health workers</td>
<td>* Correct storage and transportation of vaccines inside carrier * Use of conditioned ice packs</td>
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<td>* Correct placement and reading of dial and alcohol thermometers</td>
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<td><strong>Dispose It Right (Immunization Session)</strong></td>
<td>* Poster * Sticker</td>
<td>* Health facilities * Sub-centres Private clinics Outreach sites Anganwadi centres</td>
<td>* Immunization officers Supervisors Health workers Private providers</td>
<td>* Correct storage and disposal of waste generated during the immunization session</td>
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<td><strong>Dispose It Right (Health Facility)</strong></td>
<td>* Poster * Sticker</td>
<td>* Health facilities</td>
<td>* Immunization officers Supervisors</td>
<td>* Correct disinfection and disposal of immunization waste at the PHC level</td>
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<td><strong>Cut It Right (Hub-cutter)</strong></td>
<td>* Poster * Sticker</td>
<td>* Health facilities * Sub-centres Private clinics Outreach sites Anganwadi centres</td>
<td>* Immunization officers Supervisors Health workers Private providers</td>
<td>* Correct use and acceptance of hub cutters * Correct storage of immunization waste * Reduced needle-stick injuries</td>
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<td>Injection Safety (3 posters)</td>
<td>Poster</td>
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<td>Remind Parents of 4 Messages</td>
<td>Poster</td>
<td>Sticker</td>
<td>Health facilities</td>
<td>Sub-centres</td>
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<td>My Village is My Home</td>
<td>Poster</td>
<td>Health facilities</td>
<td>Community leaders</td>
<td>General public</td>
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<td>Every Child is VIP</td>
<td>Poster</td>
<td>Sticker</td>
<td>Health facilities</td>
<td>Sub-centres</td>
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<tr>
<td>Immunization Schedule Tool</td>
<td>Presentation</td>
<td>Health facilities</td>
<td>Sub-centres</td>
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<tr>
<td>Village Poster</td>
<td>Poster</td>
<td>Health facilities</td>
<td>General public</td>
<td>General Information about health services available</td>
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Cold Chain Job Aids
STORE IT RIGHT!
..in the Ice-Lined Refrigerator (ILR)

- Store all vaccines in baskets.
- Keep thermometer hanging position in basket and maintain temperature between +2°C to +8°C (monitor morning and evening).
- Arrange vaccines in order (top to bottom): Hep B, DPT, DT, TT, BCG, Measles, OPV, Pneumococcal.
- Follow Early Expiry First Out (EFFO).
- Store diluents in baskets, for 24 hours before next session.
- Keep space between boxes.
- Discard any frozen Hep B, DPT, TT and DT.

If ILR baskets are full...
- Store only OPV and Measles over two rows of empty ice packs at bottom.

If ILR baskets are unavailable...
- Keep Thermometer between vaccines.
- Store other vaccines over two rows of empty ice packs on platform.
- Store only OPV and Measles over two rows of empty ice packs at bottom.

Place vaccines away from direct contact with ILR walls.
FREEZE IT RIGHT!
..in the Deep Freezer (DF)

Never store UIP vaccines in the DF. Use only for freezing icepacks.

Small compartment: Arrange and store frozen icepacks vertically, in layers. Also store in cold boxes.

Unfrozen icepacks for freezing.

Large compartment: Wipe dry and arrange 20-25 unfrozen icepacks vertically (never flat) in a crisscross pattern with space for air circulation.

Keep thermometer inside and maintain temperature between -15°C to -25°C (monitor every morning and evening).
STORE IT RIGHT!
..in the Domestic Refrigerator

Freezer compartment
To prepare icepacks.
Leave space between icepacks.

Arrange vaccines in order
Chiller Tray: OPV, Measles
1st Shelf: BCG, TT
2nd Shelf: DPT, DF
3rd Shelf: Hep B
Follow Early Expiry First Out (EEFO)

Discard any frozen Hep B,
DPT, TT and DT

Space between boxes for air circulation

Unfrozen ice packs
stacked in layers on the bottom

Diluents in door pockets

Keep 2 thermometers
hanging in the DPT
compartment and the
door and maintain
temperature between
+2°C to +8°C (monitor
morning and evening)

Use BCG and Measles within
4 hrs of reconstitution

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FROM THE AMERICAN PEOPLE

YOUR LOGO HERE

YOUR LOGO HERE

Immunization Basics
1. Prepare Ice-Packs for Freezing
   - Fill the Ice-Pack with water to mark. Check water level before every use. Do NOT add salt to this water.
   - Fit the stopper and screw on the cap tightly
   - Make sure the Ice-Pack does not leak
   - Wipe the Ice-Pack dry and place in the Deep Freezer

2. Condition Frozen Ice-Packs
   - Place frozen Ice-Packs in the open till they “sweat,” (some condensation or droplets of water)
   - Check if an Ice-Pack has been conditioned by shaking it and listening for water
   - Unconditioned Ice-Packs may damage freeze sensitive vaccines (DPT, DT, TT and Hepatitis B)

3. Pack the Vaccine Carrier
   - Place four conditioned Ice-Packs against the sides of the carrier
   - Place the plastic bag containing all vaccines and diluents in the centre of the carrier.

4. Remember to:
   - Collect vaccines in the carrier on the session day (Vaccine carriers may not store vaccines effectively beyond 12 hrs)
   - Do not drop or sit on the vaccine carrier.
   - Do not leave in sunlight. Keep in shade.
   - Do not leave the lid open once packed.

Use the Vaccine Carrier Correctly
READ IT RIGHT!

- Place a functional Thermometer in every cold chain equipment.
- Hang it vertically in the centre, away from direct contact with vaccine boxes and walls.
- Do not take it out of the equipment or hold for long. Read it where it is placed.
- Use it to monitor and record temperature every morning and evening.
- Take action to correct storage temperatures temperature record is outside recommended ranges
- Replace the thermometer immediately if broken

ILR: +2°C to +8°C
DF: -15°C to -25°C
Immunization Safety Job Aids
DISPOSE IT RIGHT!

Send to Health Facility at end of Session

- Cut hub of AD and Disposable syringes
- Broken vials and ampoules
- Plastic part of Syringes
- Empty unbroken Vials
- Needle Caps Wrappers

Disinfect in 1% Hypochlorite Solution (for 30 minutes)

Disinfect with 1% bleaching powder solution (for 30 minutes)

Dispose in Safety Pit

Recycle

Dispose as Municipal Waste
Keep the hub-cutter within arm’s reach during the session

Immediately after use, carefully insert the needle and hub of AD or disposable syringe into the insertion hole

Hold the syringe and use the other hand to clamp the handles till the hub is completely cut. The cut needle and hub will drop into the container

Place the plastic part of the cut syringe in the red disposal bag

Also put broken vials and ampoules on paper and drop into the container

- Cut needles and hub
- Broken vials and ampoules
DISPOSE IT RIGHT!

- Cut hub of AD and Disposable syringes
- Broken vials and ampoules
- Plastic part of Syringes
- Empty unbroken Vials
- Needle Caps Wrappers

Return the above to Health Facility at end of the Session

NEVER throw in open
- used syringes
- used unbroken vials
- broken vials and ampoules
- caps and wrappers

NEVER burn
- used syringes
- used needles

NEVER store
- returned waste at Health facility for long. Dispose periodically
...protect yourself

- Anticipate sudden movement of the child, during and after injection. Help the care-giver to hold the child correctly and firmly for vaccination.

- Cut the hub of the syringe with the hub-cutter immediately after use.

- Never recap the needle.

- Never bend or manipulate the needle.

USAID Helps the American People

Immunization Basics

YOUR LOGO HERE

YOUR LOGO HERE
...protect me

Prepare Vaccine Correctly
- Make sure you have the correct diluent for each vaccine (from the same manufacturer)
- When reconstituting, the vaccine and the diluent must be at the same temperature
- Use a new auto-disable syringe for every beneficiary
- Use a new disposable syringe to reconstitute each vaccine vial. After use, cut immediately with the hub-cutter
- Discard a needle that has touched any non-sterile surface
- Discard a syringe that has been punctured, torn or damaged by exposure to moisture
...protect us

- Cut the hub of the syringe with the hub-cutter immediately after use
- Never throw used syringes or other injection waste in the open
- At the end of the session, return the hub-cutter and red and black bags to the PHC for safe disposal
- DON'T burn or bury used syringes and needles

! At all times you must protect the community from voluntary or accidental exposure to used injection equipment
Sharps Disposal Pit

- **Internal Diameter of GI Pipe** - minimum 50mm or 1.5 times length of vials
- **Concrete Slab**
- **Lining of Brick, Masonry or Concrete Rings**
- **Disinfected cut needles with hub of AD and Disposable syringes and Disinfected broken vials and ampoules**
- **Water Table Level**
- **Cover with Lock**
- **Seal once pit is full**
- **Ground Surface**
- **1 m to 2 m**
- **2 m to 5 m**
- **Not less than 6 m**
- **If water table is less than 6 m below the pit bottom, construct similar tank above ground**
- **Do not use the pit for any other type of waste**

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**Immunization basics**

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**USAID**

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**Your Logo Here**
Hold YOUR baby correctly for vaccination

......firmly in your lap

**Measles**

1. The baby’s right arm embraces the parent’s back and is held under the parent’s left arm.
2. The baby’s left arm and legs are controlled by the parent’s right arm and hand.

**BCG**

1. One of the baby’s arms embraces the parent’s back and is held under the parent’s arm.
2. The other arm and legs are firmly controlled by the parent’s hand.
Tracking and Communication
Job Aids
...remind parents of 4 key messages

- What vaccine was given and what disease it prevents
- When to come for the next visit
- What are the minor side-effects and how to deal with them
- To keep the immunization card safe and to bring it along for the next visit

*remember:* fully immunize each child before its first birthday
<table>
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<tr>
<th>No.</th>
<th>Name of infant (less than 1 yr)</th>
<th>DiR</th>
<th>Birth Wt.</th>
<th>BOG</th>
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Example: Riken Kamal, 65 Kham Kama

26/0 2 Bpy 7/2 7/2 21/3 11/3 9/3 21/3 11/3 9/3
make your child a VIP...
(Vaccinated, Immunized, Protected)